

## TRANSMITTAL FORM

Attorney Docket No.  
SVL920010077US1/2307P216  
TfwIn re the application of: **IYER et al.**Confirmation No: **4803**Serial No: **09/966,624**Group Art Unit: **2161**Filed: **September 27, 2001**Examiner: **Amsbury, Wayne P.**For: **Method and System for Utilizing a Database as a Service**

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/>	Amendment/Reply	<input type="checkbox"/>	Assignment and Recordation Cover Sheet	<input type="checkbox"/>	After Allowance Communication to Group
	<input type="checkbox"/> After Final	<input type="checkbox"/>	Part B-Issue Fee Transmittal	<input type="checkbox"/>	Notice of Appeal
<input type="checkbox"/>	Information disclosure statement	<input type="checkbox"/>	Letter to Draftsman	<input type="checkbox"/>	Appeal Brief
	<input type="checkbox"/> Form 1449	<input type="checkbox"/>	Drawings	<input type="checkbox"/>	Status Letter
	<input type="checkbox"/> (X) Copies of References	<input type="checkbox"/>	Petition	<input checked="" type="checkbox"/>	Postcard
<input type="checkbox"/>	Extension of Time Request *	<input type="checkbox"/>	Fee Address Indication Form	<input type="checkbox"/>	Cther Enclosure(s) (please identify below):
<input type="checkbox"/>	Express Abandonment	<input type="checkbox"/>	Terminal Disclaimer		
<input type="checkbox"/>	Certified Copy of Priority Doc	<input type="checkbox"/>	Power of Attorney and Revocation of Prior Powers		
<input type="checkbox"/>	Response to Incomplete Appln	<input type="checkbox"/>	Change of Correspondence Address		
<input type="checkbox"/>	Response to Missing Parts		*Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for xxxxxx month(s), from _____ to _____.		
	<input type="checkbox"/> Executed Declaration by Inventor(s)				

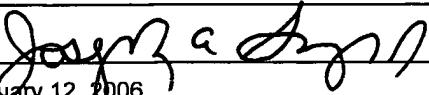
## CLAIMS

FOR	Claims Remaining After Amendment	Highest # of Claims Previously Paid For	Extra Claims	RATE	FEE
Total Claims	43	43	0	\$ 50.00	\$ 0.00
Independent Claims	9	9	0	\$200.00	\$ 0.00
				Total Fees	\$ 0.00

## METHOD OF PAYMENT

<input type="checkbox"/>	Check no. _____ in the amount of \$ _____ is enclosed for payment of fees.
<input type="checkbox"/>	Charge \$ _____ to Deposit Account No. _____ (Account Holder Name) for payment of fees.
<input checked="" type="checkbox"/>	Charge any additional fees or credit any overpayment to Deposit Account No. <u>09-0460 (IBM)</u>

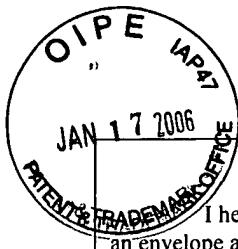
## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Attorney Name	Joseph A. Sawyer, Jr., Reg. No. 30,801
Signature	
Date	January 12, 2006

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on January 12, 2006.

Type or printed name	Kym Moore
Signature	



Attorney Docket: SVL920010077US1/2307P

CERTIFICATE OF MAIL

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to Mail Stop Amendment, the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on January 12, 2006.

  
Kym Moore

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Date: January 12, 2006

Balakrishna R. IYER et al.

Confirmation No: 4803

Serial No: 09/966,624

Group Art Unit: 2161

Filed: September 27, 2001

Examiner: Amsbury, Wayne P.

For: METHOD AND SYSTEM FOR UTILIZING A DATABASE AS A SERVICE

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated October 12, 2005, please enter the following amendment and remarks in the present application.

**Amendments to the Claims** are reflected in the listing of claims, which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 13 of this paper.